WALTER M. DICKIE, M.D., Director "Versity CALIFORNIA STATE DEPARTMENT OF PUBLICA

Weekly



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GUY P. JONES EDITOR

Regulations for Control of Syphilis and Gonococcus Infections

At its regular meeting held in Los Angeles, January 2, 1937, the California State Board of Public Health repealed all previous regulations for the control of syphilis and gonococcus infections and adopted the following regulations:

REGULATIONS OF THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH FOR THE PREVENTION OF SYPHILIS AND GONOCOCCUS INFECTIONS

It shall be the duty of every person who gives treatment for syphilis or gonorrhea to report in writing immediately to the local health officer within whose jurisdiction such patient is, on a card supplied by the State Department of Public Health, the patient's initials, sex and date of birth.

The local health officer shall forward these reports to the State Department of Public Health at least weekly.

The physician shall keep a record by name and address of each patient treated.

The name and address of the patient shall be reported to the local or state health official to whom the attending physician is required to report such case, upon the special request of such official if in his judgment this may be necessary to prevent the spread of the disease to other persons.

Whenever any person suffering from syphilis or gonorrhea shall discontinue treatment while in the

judgment of the attending physician he is capable of transmitting the disease to others, such physician shall report immediately such facts together with the patient's initials and date of birth to the local or state health official to whom the attending physician is required to report such case.

Records of any local department of health or of any local health officer or of any laboratory, clinic or other institution relating to cases of syphilis or gonorrhea shall be confidential except insofar as may be necessary to carry out the provisions of the law and these regulations.

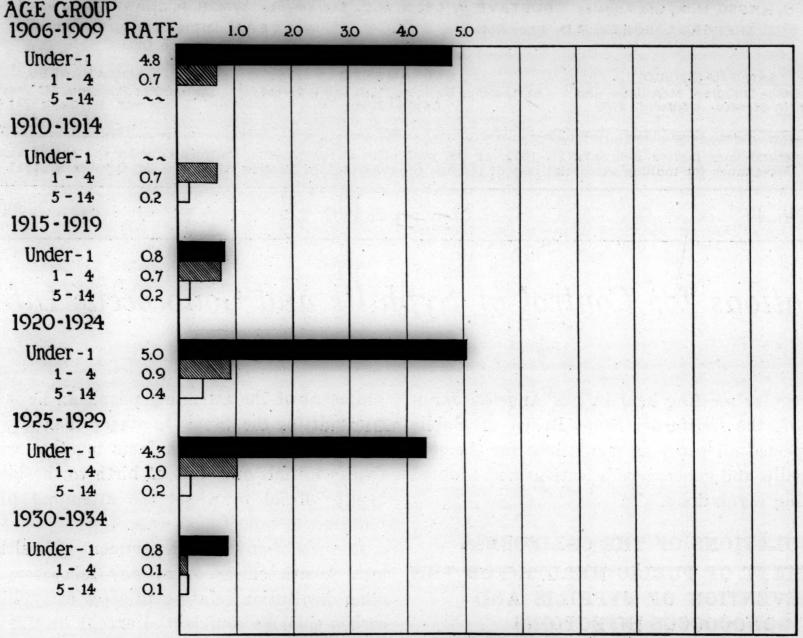
WHAT PRICE RECREATION

And one has only to look at the hollow-eyed, bodyblistered, head-cold infected men and women limping back from week-ends and vacations to realize fully what atrocities against mental and physical health are self-inflicted under the guise of recreation. The head of a large business firm told me that he dreaded the vacation season each year because of the heavy toll of illnesses that always followed for weeks afterwards among his employees, to say nothing of their reduced mental efficiency and lowered morale. It is well that we think a bit seriously about this business of refreshing ourselves in this period of our history when shorter working hours give greater leisure. Do we know how to spend them to the best advantage? What price Recreation!—Esther Loring Richards, M. D.

SMALLPOX AND VACCINATION

It is axiomatic that smallpox does not appear in those communities where a considerable proportion of the population is vaccinated. Every now and then the disease appears suddenly in communities that are unprotected. Children often fall victims to this disease when it appears in an unvaccinated community. The story of smallpox mortality in California during the past thirty years is told in the chart printed herewith. Progress has been made in the prevention of deaths from smallpox but there should be a far better record than is shown in this diagram.





SMALLPOX

THE EIGHTH GORGAS ESSAY CONTEST

Eleventh and twelfth grade students are again offered the opportunity to compete in a contest that should be extremely interesting and very profitable to the contestant. The subject assigned is "The Importance of Mosquito Control and the Gorgas Memorial." The closing date will be January 15, 1937. The maximum length of the essay is fifteen hundred words, and the manuscript must be accompanied by a photograph and an official entry blank. Each high school principal will want to have his school represented and can cooperate as follows:

1. Obtain full information concerning the contest from the headquarters office of the Gorgas Memorial Institute at 1835 Eye Street, Washington.

- 2. Announce and discuss the contest in the assembly and in class meetings.
- 3. Print or mimeograph the rules of the contest and distribute copies among juniors and seniors.
 - 4. Have a display on the school bulletin board.
 - 5. Select a teacher to take charge of the contest.
- 6. Provide the required references and obtain the free material.

Begin now and work for a prize. High school winners will receive Gorgas Medals, and the right to enter in the state competition. State winners will receive ten dollars and may enter the national contest. The winner of the national prize receives five hundred dollars and a trip to Washington.

THE HEALTH OF THE TODDLER

Babies are watched over with the greatest care but after two years of age when the baby becomes the toddler, he does not receive so much attention and, in fact, is often neglected. When he enters school there is generally some provision for guiding and guarding his health but before he enters school very often he is left to his own devices. This may help to develop self-reliance and individuality but it may also lead to the development of bad habits in health and in behavior. Actually, the toddler needs guidance in the rapid development that comes during the years between two and six. When he enters school the child should not be like Shakespeare's "whining school boy with his satchel and shining morning face." The shining morning face is approved but the whining indicates bad habits in health and behavior and the change of routine that comes with school life requires a balance between physical and mental health.

The formation of proper health habits is of great importance. The proper sort of foods, served at proper times and in proper quantities, constitutes a necessary factor in the promotion of child health. Regular elimination, together with adequate exercise and plenty of fresh air, are also of the greatest importance. In the provision of proper food the parent has an important duty to perform. Not only must food values be considered, but meals should be served at regular hours and they should be made to appear as attractive as possible.

There is need for establishing proper habits in eating. If, in infancy, the child has been fed too often he may develop a distaste for food. If, at a later age, the mother crowds too much food upon a child, the same development of a distaste may occur. Consequently, the parent should exercise care lest the standard of food intake be set too high.

It is quite an effort of nerve and muscle for a toddler to handle his own fork and spoon and he should be rested when he tackles this strenuous new exercise. At least thirty minutes should be allowed for the child's meal. Since the child imitates the parent it is important that the parent appear to enjoy eating all kinds of food and as if he expected the child to do so. Really, the attitude of the parents at meal time has much to do with the promotion of proper food habits in the child. Meal time is a good time to develop an atmosphere of contentment and happiness. The child, alone, will profit through the provision of such an atmosphere. If foods that are new or unfamiliar to the child are served, they should be offered in small quantities, thus developing a natural appetite for such foods.

The necessity of regular habits of elimination must

not be overlooked. The formation of these habits should be started in infancy and arrangements made so that the toddler can continue to perform these good habits, gradually learning to attend to his own wants. The selection of proper foods with considerable bulk, such as leafy vegetables and coarser cereals will assist in the formation of proper habits of elimination.

Those who are best equipped to give advice in the science of diet, insist upon the need of one quart of milk daily for each child. This is regarded as essential for proper growth as it contains the daily amount of calcium needed for building the bony structure. Fruits and vegetables provide vitamin, minerals and bulk as well as fruit sugars and acids. After these needs have been taken care of the rest of the diet, cereal, potatoes, bread and other starch foods may be added. After the age of two years a small amount of meat or fish is needed for muscle building.

THE COMMON COLD

A foe of mankind which, strangely enough, is very innocent in itself. The complications of the common cold result in the great amount of disability which its victims suffer. Repeated surveys show that more than 50% of illness time loss from school and work is chargeable to the common cold and its complications. What can be done about it?

There is no proven means of immunization against it. Forcible isolation of cases is out of the question because of the large numbers and the relatively low severity.

The common cold responds to rest and to the observation of the simple rules of hygiene. Two or three days spent in bed will in most cases see the end of even the more severe forms. In the event of unusual symptoms, a physician should be called.

If everyone would treat his cold in this way, two things would be accomplished. First, recovery with a minimum period of illness, usually without complications; and second, the virus would not be scattered among associates.—Pasadena Health Happenings.

GOOD HEALTH STOPS FEAR

Some people just naturally seem to harbor fears, while others seldom, if ever, know what it is to be "jumpy" or afraid. This is not merely a matter of make-up, although a person with a more sensitive nervous system is more prone to fears, but it is certainly a matter of health. Any sickness lowers the tone of the entire nervous system. Give the nerves health and most fears will disappear!—Health Digest.

MORBIDITY

Complete Reports for Following Diseases for Week Ending December 26, 1936.

Chickenpox

390 cases: Alameda 6, Berkeley 5, Livermore 1, Oakland 11, Pleasanton 9, San Leandro 8, Butte County 7, Contra Costa County 2, Pittsburg 2, Fresno County 3, Fresno 12, Sanger 8, Humboldt County 2, El Centro 1, Kern County 12, Kings County 1, Los Angeles County 35, Alhambra 1, Burbank 1, Claremont 1, El Monte 4, Glendale 3, Long Beach 11, Los Angeles 43, Monrovia 1, Pasadena 2, Pomona 14, San Gabriel 1, San Marino 1, Whittier 1, Lynwood 1, South Gate 1, Chowchilla 2, Mono County 2, Monterey County 8, Orange County 1, Fullerton 1, Santa Ana 6, Riverside County 7, Corona 4, Riverside 2, Sacramento County 6, Sacramento 9, Upland 1, San Diego County 5, San Diego 13, San Francisco 45, San Joaquin County 3, San Luis Obispo County 1, San Mateo County 1, Burlingame 7, Redwood City 2, Santa Barbara County 1, Santa Barbara 2, Santa Clara County 1, Mountain View 1, Palo Alto 6, San Jose 2, Santa Cruz County 1, Santa Cruz 1, Redding 1, Siskiyou County 4, Vallejo 1, Sonoma County 4, Healdsburg 2, Stanislaus County 1, Oakdale 3, Tulare County 1, Porterville 1, Ventura County 11, Santa Paula 1, Yolo County 6, Woodland 2.

Diphtheria

42 cases: Hayward 1, Oakland 2, Fresno 1, Kern County 4, Bakersfield 2, Los Angeles County 3, Alhambra 1, Long Beach 2, Los Angeles 10, Pasadena 1, Orange County 1, Roseville 3, Riverside County 1, San Diego 1, San Francisco 2, San Luis Obispo 1, San Jose 1, Sonoma County 1, Sutter County 1, Yuba City 2, Ventura County 1.

German Measles

8 cases: Alameda 1, Berkeley 1, Long Beach 1, Los Angeles 2, Maywood 1, Hemet 1, Davis 1.

50 cases: Alameda 2, Oakland 2, Fresno County 3, Fresno 1, Kern County 1, Los Angeles County 11, El Monte 1, Los Angeles 15, Pasadena 1, Whittier 1, Riverside 1, San Bernardino County 2, San Francisco 1, Santa Cruz County 5, Sonoma County 3.

Malaria

One case: San Bernardino County.

Measles

19 cases: Azusa 1, Glendale 2, Inglewood 1, Los Angeles 5, San Fernando 1, Santa Monica 1, Santa Ana 1, Sacramento County 4, San Francisco 2, Santa Barbara County 1.

Mumps

288 cases: Alameda 5, Berkeley 7, Oakland 3, Butte County 5, Gridley 1, Oroville 8, Martinez 1, Fresno County 3, Fresno 3, Kern County 4, Kings County 4, Los Angeles County 24, Alhambra 4, Burbank 5, Compton 1, Glendale 2, Hermosa 1, Huntington Park 1, Inglewood 4, Long Beach 1, Los Angeles 24, Pasadena 4, Pomona 1, Redondo 2, Santa Monica 1, South Pasadena 1, Whittier 2, Lynwood 1, Hawthorne 5, South Gate 1, Orange County 5, Brea 1, Orange 2, Santa Ana 9, Tustin 1, Riverside County 24, Riverside 26, Sacramento County 1, Sacramento 8, San Bernardino County 5, San Bernardino County 5, San Bernardino 2, National City 1, San Diego 12, San Francisco 8, San Joaquin County 7, Stockton 1, San Mateo County 1, Lompoc 2, Sonoma County 6, Porterville 2, Ventura County 17, Fillmore 14, Santa Paula 3, Yolo County 1. County 1.

Pneumonia (Lobar)

79 cases: Berkeley 3, Colusa 2, Fresno County 3, Fresno 1, Sanger 1, Westmoreland 1, Kern County 2, Bakersfield 1, Los Angeles County 1, Glendale 2, Los Angeles 35, Santa Monica 1, Whittier 1, Torrance 1, Bell 1, Riverside County 2, Riverside 1, Sacramento 3, San Bernardino County 1, Colton 1, San Diego County 1, San Francisco 5, Stockton 1, Palo Alto 1, Sonoma County 2, Stanislaus County 2, Modesto 1, Tulare County 2.

Scarlet Fever

235 cases: Alameda 1, Berkeley 3, Oakland 9, Butte County 1, Chico 4, Contra Costa County 3, El Cerrito 1, Pittsburg 1, Fresno County 10, Fresno 2, Humboldt County 1, Kern County 6, Bakersfield 1, Susanville 1, Los Angeles County 12, Alhambra 1, Avalon 1, Glendale 2, Long Beach 5, Los Angeles 26, Monrovia 1, San Fernando 1, South Gate 2, Madera County 2, San Anselmo 8, Mariposa County 2, Yosemite National Park 2, Merced County 2, Merced 5, Monterey County 1, Napa County 1, Napa 5, Orange County 2, Brea 3, Santa Ana 4, Placentia 1, Roseville 3, Riverside County 6, Corona 2, Riverside 1, Sacramento County 1, Sacramento 13, San Diego County 1, National City 1, San Diego 6, San Francisco 10, San Joaquin County 2, Burlingame 1, Colma 1, Santa Barbara County 1, Santa Clara County 3, Palo Alto 1, San Jose 5, Santa Cruz County 4, Santa Cruz 2, Shasta County 3, Redding 1, Siskiyou County 1, Vallejo 4, Sonoma County 5, Healdsburg 1, Tulare County 7, Porterville 4, Ventura County 11, Yolo County 1.

Smallpox

11 cases: Contra Costa County 4, Walnut Creek 1, Burbank 1, Sacramento County 1, San Joaquin County 3, California 1.*

Typhoid Fever

8 cases: Oakland 1, Fresno 1, Los Angeles 2, Atwater 1, San Francisco 1, Tulare County 1, Marysville 1.

Whooping Cough

218 cases: Alameda 3, Berkeley 3, Oakland 1, Fresno County 218 cases: Alameda 3, Berkeley 3, Oakland 1, Fresho County 38, Fresho 1, Kern County 1, Los Angeles County 14, Huntington Park 3, Inglewood 1, Los Angeles 48, Santa Monica 1, South Pasadena 1, Whittier 3, Madera County 3, Merced 1, Mono County 19, Orange County 2, Anaheim 2, Riverside County 18, Corona 14, Hemet 1, Riverside 1, Sacramento 1, San Diego 7, San Francisco 6, Stockton 1, San Luis Obispo 1, Santa Barbara County 1, Santa Barbara 2, Sonoma County 1, Tulare County 4, Ventura County 12, Oxnard 1, Ojai 2.

Meningitis (Epidemic)

3 cases: Bakersfield 1, Long Beach 1, Sonoma County 1.

Dysentery (Bacillary)

5 cases: Los Angeles County 1, Los Angeles 1, Redondo 1, San Francisco 1, Belmont 1.

Pellagra

2 cases: Los Angeles County 1, San Bernardino County 1.

Poliomyelitis

3 cases: Fresno County 1, Los Angeles County 1, La Mesa 1.

Trachoma

3 cases: Los Angeles.

Paratyphoid Fever

One case: San Francisco.

Undulant Fever

One case: Pomona.

Coccidioidal Granuloma

One case: Los Angeles County.

Septic Sore Throat (Epidemic)

One case: San Francisco.

Rabies (Animal)

21 cases: Coalinga 1, Los Angeles County 2, Glendale 1, Long Beach 4, Los Angeles 10, Torrance 1, San Bernardino 2.

*Cases charged to "California" represent patients ill before entering the State or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are not chargeable to any one locality.

The actual fact is that in this day Opportunity not only knocks at your door but is playing an anvil chorus on every man's door, and then lays for the owner around the corner with a club. The world is in sore need of men who can do things. Indeed, cases can easily be recalled by everyone where Opportunity actually smashed in the door and collared her candidate and dragged him forth to success. These cases are exceptional; usually you have to meet Opportunity half-way. But the only place where you can get away from Opportunity is to lie down and die. Opportunity does not trouble dead men, or dead ones who flatter themselves that they are alive.—Elbert Hubbard.

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